

Form CPF M 102: Campaign Finance Report

Municipal Form LECTION DEPT. Office of Campaign and Political Finance NA

2020 JAN 16 P 5: 45

		F	ile with: City or	Town Clerk	or Election Commission
Fill in Reporting Period dates: Beginning Date: 1/1/	2019	Ending D	ate: 12/31	1/2019	
Type of Report: (Check one)					
☐ 8th day preceding preliminary ☐ 8th day preceding election	☐ 30 day	after election	🗵 year-end	report	dissolution
Lee Erica Palmer	Commit	tee to Elect Lee			
Candidate Full Name (if applicable)			Committee Nar	ne	
School Committee - Ward 3, Somerville Office Sought and District	Karen G		ne of Committee T	F	
17 Pitman Street, Somerville, MA 02143	17 Ditn	nan Street, Some			
Residential Address	17 PILLI		mmittee Mailing		
E-mail: lee erica palmer @gmail. com	E-mail:	Karenlaa			il com
Phone # (optional): 7813301740	Phone # (c			5133296	70.00/01
SUMMARY BALANC	CE INFO	RMATION:			
Line 1: Ending Balance from previous report				3731.28	
Line 2: Total receipts this period (page 3, line 11)			(0
Line 3: Subtotal (line 1 plus line 2)				3731.28	<u> </u>
Line 4: Total expenditures this period (page 5, lin	ne 14)			224.40	
Line 5: Ending Balance (line 3 minus line 4)				3506.88	
Line 6: Total in-kind contributions this period (p	age 6)			0.00	-
Line 7: Total (all) outstanding liabilities (page 7)	,		77	0.00	
Line 8: Name of bank(s) used: East Cambridge Sa					1
Affidavit of Committee Treasurer: I certify that I have examined this report including attached schedules and it is, to the besactivity, including all contributions, loans, receipts, expenditures, disbursements, in-kind finance activity of all persons acting under the authority or on behalf of this committee in Signed under the penalties of perjury:	contributions	and liabilities for this	reporting period a of M.G.L. c. 55.	atement of al and represen Date:	Il campaign finance uts the campaign
FOR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 b	ox only)				
Candidate with Committee I certify that I have examined this report including attached schedules and it is, to the activity, of all persons acting under the authority or on behalf of this committee in a incurred any liabilities nor made any expenditures on my behalf during this reporting	ccordance with	the requirements of	M.G.L. c. 55. I ha	ave not recei	of all campaign finance ived any contributions,
Candidate without Committee I certify that I have examined this report including attached schedules and it is, to the finance activity, including contributions, loans, receipts, expenditures, disbursement campaign finance activity of all persons acting under the authority or on behalf of the	ts, in-kind cont	ributions and liabiliti	es for this reportir	ng period and	d represents the
Signed under the penalties of perjury: Lee Gun Pu		(Candidate's	s signature)	Date:	1/14/2020

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

report all receipts. P	port all receipts. Please include your committee name and a page number on each page.)					
	Name and Residential Address	Amount	Occupation & Employer (for contributions of \$200 or more)			
Date Received	(alphabetical listing required)	Amount	(IOI CONCINDUCIONS OF 3200 OF INOTE)			
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Line O. Tetal Pers	ints over \$50 (or listed shove)	0.00				
Line 9; Total Rece	ipts over \$50 (or listed above)	0.00				
Line 10: Total Rec	eipts \$50 and under* (not listed above)	0.00				
Line 11: TOTAL	RECEIPTS IN THE PERIOD	0.00	← Enter on page 1, line 2			
	1 1 COCO 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	a O. I ima 10 ahaul	d include only those receipts not itemized above			

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
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Line 9: Total Recei	pts over \$50 (or listed above)		
Line 10: Total Rece	ipts \$50 and under* (not listed above)		
Line 11: TOTAL R	RECEIPTS IN THE PERIOD	A Haran Commence of the Commen	← Enter on page 1, line 2
	receipts of \$50 and under include them in line		

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to

	To Whom Paid	Addungs	Purpose of Expenditure	Amount
Date Paid	(alphabetical listing)	Address		1 MOUNT
	DreamHost	PMB #257, 417 Associated Rd., Brea, CA 92821	Web hosting costs	110.40
.2/7/2019				119.40
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		Line 12: Total Expenditures or	ver \$50 (or listed above)	119.4
	•			
		Line 13: Total Expenditures \$5	0 and under* (not listed above)	105.0
				~~.
	Enter on page 1, line 4	Line 14: TOTAL EXPENDIT	TURES IN THE PERIOD	224.4

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above. Page 4

SCHEDULE B: EXPENDITURES (continued)

To Whom Paid Continued					
Date Paid	(alphabetical listing)	Address	Purpose of Expenditure	Amount	
			Twiposo of appointment	Amount	
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		Line 12: Expenditures over \$50	(or listed above)	THE THE PARTY OF T	
	•				
		Line 13: Expenditures \$50 and	under* (not listed above)		
	Enter on page 1, line 4 →	Line 14: TOTAL EXPENDIT	URES IN THE PERIOD	THE CONTRACT OF THE CONTRACT O	
e review have dame		; include them in line 12. Line 13 si	•		

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value	
	n/a				
- Comment of the Comm					
				Annalis kinda kind	
	i .	Line 15: In-Kind Contribution	s over \$50 (or listed above)		
		Line 16: In-Kind Contributions	\$50 & under (not listed above)		
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND C	ONTRIBUTIONS	name and address	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
	n/a			
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